



2024 Annual Accountability Report

**South Carolina Department of Alcohol
and Other Drug Abuse Services**

Agency Code: J200

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AGENCY’S DISCUSSION AND ANALYSIS

The Department of Alcohol and Other Drug Abuse Services (DAODAS) is South Carolina’s lead agency responsible for managing public addiction programs and services and is the Single State Agency designated to administer federal funds for substance use prevention, treatment, and recovery services. With alcohol, tobacco, and other drugs affecting South Carolinians of all ages and from all walks of life, substance-related issues impact healthcare costs, other economic factors, and our justice system. It is DAODAS’ mission to ensure the availability and quality of a continuum of substance use services to improve the health, safety, and quality of life of individuals, families, and communities in South Carolina.

DAODAS accomplishes its work through five closely aligned divisions:

Prevention and Intervention Services – Develops and coordinates comprehensive state and community-based programs.

Treatment and Recovery Services – Improves access to care and promotes high-quality, effective treatment and recovery options for individuals and families in every community.

Technology, Research and Evaluation – Provides outcome analysis, sets contract objectives, conducts service provider evaluations, and assesses quality of statewide services.

Legal and Compliance – Works with service providers to ensure that services are rendered according to state and federal guidelines, standards, and criteria.

Finance and Operations – Manages funds, contract execution, and analysis to maximize financial and operational performance while minimizing risk.

By working together, these divisions ensure that the agency is responsive to the state’s needs by fulfilling its roles in:

Planning

- Understanding each county and the state’s unique needs, capacity, and strategies to address substance use issues.
- Developing a comprehensive plan for addressing addiction service delivery and capturing data on the programs and services provided.

Managing Federal and State Funds

- Overseeing the funds that serve as the cornerstone of the state’s publicly funded service-delivery system.
- Helping ensure that all individuals receive the prevention, treatment, and recovery services that they need.

Ensuring Quality

- Conducting year-round compliance reviews of providers to ensure adherence with standards and to promote effective, high-quality services.
- Monitoring agency partners’ maintenance of accreditation; implementation of evidence-based screening tools; and use of American Society of Addiction Medicine (ASAM) Patient Placement Criteria to ensure that patients are placed in the appropriate level of care.

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Coordinating with Other State Agencies

- Ensuring that addiction issues are addressed with a coordinated, cross-agency approach that aligns across sectors.

Maintaining a Unique Relationship with Providers

- Remaining in regular contact with provider organizations to support the substance use disorder (SUD) provider community, offering support, technical assistance, and oversight.

Highlights of achievements inside of and across these roles are outlined in the sections below.

Planning

In 2024, DAODAS engaged in a **planning process to identify priorities and to guide the work of the agency and the state’s publicly funded addiction services** through 2028.

Various methods were used to gather feedback and insights from South Carolinians in formulating the priorities for publicly funded addiction services. This involved examining existing strategic plans from other state agencies providing addiction services, analyzing data from 356 stakeholders who completed a planning priorities survey, and conducting four key-informant interviews with state leaders. Additionally, focus groups were held with individuals closely associated with substance use services in South Carolina to identify emerging trends, and an in-person facilitated retreat was convened to review all collected data and co-create guiding principles and priorities essential for advancing publicly funded addiction services.

The resulting strategy outlines key opportunities for growth as the State of South Carolina endeavors to fulfill its obligations to its citizens and emerge as a national frontrunner in addressing behavioral health. The priorities for South Carolina’s publicly funded addiction services from 2024 to 2028 include:

- *Accessibility of Appropriate Levels of Outpatient and Inpatient Care:* Support accessibility of the full continuum of care (as defined by ASAM) to every individual in need of treatment services.
- *Community-Based Prevention:* Enhance and expand community-based prevention services throughout the state by increasing the number of certified prevention specialists by 30% and increasing the number of funded local prevention providers to 50.
- *Targeted Outreach and Evidence-Based Intervention:* Increase targeted outreach programming using evidence-based intervention models.
- *Recovery Support Programs:* Expand and support a robust network of recovery support services across the state.

Six guiding principles were chosen to serve as foundational values and beliefs that provide a framework for assessing options, setting priorities, allocating resources, developing policies, and implementing programs: (1) making data-driven decisions for investments that pursue continuous quality improvement; (2) increasing and fostering coordination and collaboration for optimal programs and services; (3) prioritizing prevention for South Carolinians of all ages; (4) when appropriate, ensuring work is recovery-oriented for a person-centered, strength-

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based approach to wellness and quality of life; (5) only funding and supporting evidence-based/evidence informed practices; and (6) ensuring accountability of public substance use services in South Carolina.

To be successful in reaching any goal that addresses SUDs, solid foundational elements must be in place to ensure the quality and sustainability of administrative, program, or service infrastructure. These foundational elements create an ecosystem to support the best possible work as the state addresses substance misuse/addiction and include: (1) Workforce Development; (2) Data Infrastructure; and (3) Coordinated Systems for Whole-Patient Care, all of which DAODAS will continue to focus on as an underpinning of all priorities and goals going forward.

Managing Federal and State Funds

Implementation by DAODAS of a **Grants Management System (GMS)** has enhanced internal efficiency and eased the burden on contractors/sub-grantees. The department has introduced this electronic GMS to increase the quality and accountability of prevention, intervention, treatment, and recovery services. The goal is to streamline interfaces for contractors/sub-grantees by consolidating multi-funder project source allocations.

Funding announcements are now publicly posted in the DAODAS Grant Application Portal for interested entities to view and submit applications. Training on the Grant Application Portal was provided to county alcohol and drug authorities through several open sessions, and one-on-one technical assistance to sub-grantees has been ongoing during implementation. Implementation of the GMS has been a large undertaking for the agency and its contractors, but the new system has allowed DAODAS to review internal processes, evaluate data collection, and reduce administrative burden on local providers and contractors.

The impact of the federal **State Opioid Response (SOR) Grant** on South Carolina’s opioid crisis has been profound. Over the past year, the state has seen a stabilization in overdose rates, increased engagement in treatment services, and a growing number of individuals achieving sustained recovery with supportive resources. The grant has not only provided immediate relief to those affected by the opioid crisis but has also laid the groundwork for a more resilient and responsive public health system.

As South Carolina continues to confront the challenges posed by an evolving drug crisis, the ongoing support from the SOR Grant (which extends to stimulants) is crucial in sustaining positive outcomes and ensuring that all residents have access to the care and support they need. The federal investment has proven to be a catalyst for change, driving progress toward a healthier and safer South Carolina.

The most significant benefits of the SOR Grant have been expansion of medication for opioid use disorder (MOUD) services in rural and underserved communities across the state. Other benefits are the ability to provide peer support services and FDA-approved MOUDs in corrections facilities; to increase the availability of evidence-based treatment options; and to enable the integration of addictions treatment into primary care and acute care settings, making it more accessible to individuals in rural and underserved areas.

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DAODAS has worked with three hospital systems to create and expand the availability of addictions treatment for patients while in care and during transition to outpatient services. During this fiscal year, 278 inpatient participants were initiated on life-saving medication treatment for addiction. In total, SOR funds have enabled 3,800 individuals to receive MOUD and other treatment services who might otherwise have gone without care.

The impact of the SOR Grant has been extended beyond opioid services, with over 1,600 unduplicated South Carolina residents receiving stimulant use services through SOR. Additionally, SOR has funded recovery housing, recovery coaching, and employment support for over 7,400 individuals. This comprehensive approach highlights the grant’s effectiveness in addressing both opioid and stimulant use disorders while supporting long-term recovery for thousands of residents across South Carolina.

The SOR Grant and other federal funds allowed DAODAS to continue dissemination of information through three public education campaigns. Each campaign utilizes a combination of Facebook, Instagram, and X, with marketing partner Chernoff Newman responsible for creating branded, cohesive content to share across the platforms. *Just Plain Killers* (www.justplainkillers.com) seeks to educate the public on the prescription opioid crisis and to provide prevention information to help stop the epidemic, as well as information on treatment and recovery resources. Social media impressions in Fiscal Year 2024 (FY24) totaled 3,683,926 across all three platforms from over 420 posts. *Embrace Recovery SC* (www.embracerecoverysc.com) was launched in Fiscal Year 2021 to raise awareness and reduce stigma related to individuals in recovery. Social media impressions in FY24 totaled 67,354 across all three platforms from over 400 posts. A new campaign for FY24, *Open Conversation SC* (www.openconversationsc.com), was launched in November 2023. This campaign encourages parents and caregivers to have conversations with children, tweens, teens, and young adults about alcohol, tobacco, and other drugs. The website includes age-appropriate activities that can be downloaded to serve as conversation starters, as well as video vignettes providing tips and guidance for getting conversations started and keeping them going. Social media impressions for FY24 (starting in December 2023) totaled 80,529 across Facebook and Instagram from over 190 posts.

As required by the SOR Grant, DAODAS has developed a naloxone saturation plan that sets targeted naloxone distribution levels at thresholds that address increases in opioid overdoses across all 46 counties. Based on a formula and using federal and state funds, specific allocations of naloxone are now provided to each county to avoid disruption in access to the opioid reversal agent. From October 1, 2023, through June 30, 2024, 24,172 naloxone kits were distributed to patients, caregivers, and community members throughout the state by designated Community Distributors.

In tandem with the SOR Grant, DAODAS continued to administer the South Carolina Overdose Prevention Grant, a federal award through the Substance Abuse and Mental Health Services Administration (SAMHSA). The grant’s three main goals are: (1) to identify high-need communities for targeting of prevention efforts in rank order of highest need; (2) to train law enforcement officers (first responders) and, similarly, firefighters, patients, and caregivers to recognize overdose, administer naloxone, and monitor an individual’s response until

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emergency medical services personnel arrive; and (3) to increase the number of prescribers in the state who are informed about the risk factors associated with opioid overdose and to partner with the S.C. Pharmacy Association. Through the Law Enforcement Officer Naloxone (LEON) and Reducing Opioid Loss of Life (ROLL) programs, 1,587 law enforcement and 1,358 fire departments were trained in naloxone administrations during calendar year 2023. During this same period, 931 administrations were reported from LEON and 884 administrations were reported from ROLL. In the first six months of calendar year 2024, 108 administrations were reported for LEON and 311 for ROLL.

DAODAS continues to oversee spending of the **American Rescue Plan Act (ARPA) Program Supplement** to the Substance Use Prevention, Treatment, and Recovery Services (SUPTRS) Block Grant. Funds are focused on schools and colleges, public education and awareness campaigns, expansion of overdose education and naloxone distribution in county jails, community-based diversion programs, expansion of women’s programs, and expansion of recovery community organizations. An example of these funded activities is transportation support. To date, 4,468 patients in need of transportation have been provided with transportation to treatment services. The ARPA Program Supplement closes September 30, 2025.

Congress has also designated DAODAS as the recipient of over five years of **U.S. Department of Housing and Urban Development funding to support recovery housing**. Through DAODAS’ innovative Recovery Housing Program, individuals in recovery from an SUD may apply for housing vouchers and receive funding for up to two years or until permanent housing is established. To date, DAODAS has approved 1,996 South Carolinians to receive safe and stable recovery housing. In addition, for SFY25, DAODAS has received \$250,000 from the S.C. Department of Veterans’ Affairs for veterans in recovery from an SUD who are homeless or at risk of homelessness. Each applicant will be eligible to receive up to \$1,250 per month in recovery housing rental assistance for up to six months.

With support from the General Assembly, **collegiate recovery programming** has grown in our state. In FY24, DAODAS expanded this effort to five institutions – the University of South Carolina, Greenville Technical College, Allen University, Benedict College, and South Carolina State University. All five schools offer academic support in designated spaces that provide for group meetings, clinical support, technology access, and academic advising to assist students in recovery. One institution has expanded its services to include the Community Distribution of naloxone, and two others are in the discovery phases of Community Distribution. One program has begun providing services on satellite campuses to increase the delivery of recovery support services. Allen University, an HBCU, is in-process to become a training hub for Certified Peer Support Specialists and other recovery-related trainings for all HBCUs in South Carolina.

Ensuring Quality

DAODAS’ Internal Auditor performs **financial compliance reviews and cost audits** of the state’s county alcohol and drug authorities. In FY24, financial compliance reviews were conducted on 70% of the county authorities.

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During this fiscal year, the department’s Compliance Specialists provided technical support to county authorities, opioid treatment programs (OTPs), and recovery organizations on a range of issues, including ASAM criteria, peer support, and Cognitive Behavioral Therapy, and consulted with the S.C. Department of Health and Human Services (DHHS) to address compliance, quality of care, and implementation of changes for all Medicaid providers.

The DAODAS Legal and Compliance Division conducted **site visits** to 22 county authorities after completing desk audits to address documentation and billing compliance through review of electronic health records. Members of this division and the Treatment and Recovery Services Division provided extensive training opportunities and technical support for the county authorities during FY24 and implemented corrective action plans when necessary.

In FY24, the Legal and Compliance Division also **reviewed internal auditing procedures with all 28 contracted OTPs** and completed Medicaid file reviews of 17 OTPs. The State Opioid Treatment Authority (SOTA), housed at DAODAS, also monitored OTPs’ operations to ensure quality and regulatory compliance, as well as reviewing – and approving or denying – OTPs’ requests for take-home dosing and implementation of interim maintenance.

Coordinating with Other State Agencies

South Carolina Center of Excellence in Addiction (COE)

In response to the evolving addiction crisis impacting communities across the state, the COE was established in 2023 by DAODAS, Clemson University, the University of South Carolina, the Medical University of South Carolina, and the S.C. Department of Public Health. In an effort to combine and more efficiently apply expertise and resources that will address opioid use disorder and other SUDs in the state, the Center of Excellence operates as one collaborative institution jointly owned and operated by the three universities and two state agencies.

Administrative functions of the COE are led by an Executive Director, embedded within DAODAS, who leverages agency capacity and infrastructure for foundational operations, including contracting, budgeting, and communications. In its first year of operations, which included part of Fiscal Year 2023, the COE achieved its objectives related to establishment and initiation of operations and began delivering services and supports to South Carolina stakeholders. This included providing direct technical assistance to over 60 unique South Carolina entities on planning and implementing SUD/OD abatement strategies; delivering 25 free, confidential peer-to-peer provider consults on SUD/OD treatment; and hosting biweekly ECHO learning engagements. Additionally, the COE has completed analysis of state Medicaid data on OUD diagnoses, treatment initiation and delivery, and ongoing engagement in treatment to provide both a state-level dashboard and county-level reports on treatment system performance. The COE also planned and hosted the 2024 Governor’s Opioid and Addiction Summit, welcoming 716 registrants.

S.C. Department of Corrections (SCDC)

DAODAS continued working with SCDC to better serve individuals involved in the justice system; to provide SUD services to youthful offenders released from prison to help reduce recidivism and SUDs; and to operate the Step UP! Program, which begins the process of re-

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integrating offenders back into the community. In FY24, 58 inmates with OUD were provided medication for OUD upon release and referred to county alcohol and drug authorities by peer support professionals.

S.C. Department of Social Services (DSS)

DAODAS and DSS continued coordinating services and programming across agencies that address families involved in the DSS system for reasons related to alcohol and other drugs. In FY24, the two agencies launched a new effort that focused on training DSS case workers on urine screening and how to accurately read the screens. In February 2024, DAODAS began operating a consultation hotline to answer questions or concerns regarding drug testing from DSS case workers. By June 30, 2024, the hotline had received 69 calls.

S.C. Department of Health and Human Services (DHHS)

DAODAS and DHHS collaborated in FY24 to enhance workforce capacity, including adding Licensed Addiction Counselors as qualified providers under the Medicaid Rehabilitative Behavioral Health Services Manual and increasing reimbursement rates. These rate increases support the active engagement of medical health professionals to address SUDs, particularly OUD.

S.C. Opioid Emergency Response Team (SCOERT)

Under the joint leadership of DAODAS Director Sara Goldsby and S.C. Law Enforcement Division Chief Mark Keel, the SCOERT continued supporting cross-sector collaboration to prevent and address the misuse of prescription opioids and the use of illicit opioids. In FY24, the SCOERT’s efforts resulted in increased real-time knowledge of overdose trends, expanded uptake of evidence-based initiatives and innovative strategies, and greater targeting of resources to address opioid overdose burden. Provisional overdose death data from the Centers for Disease Control and Prevention predict that South Carolina saw a 12.51% decrease in the number of drug overdose deaths from March 2023 to March 2024. This is a significant decrease in drug-related mortality for the state, and a strong indicator that work to address opioids across sectors is having an impact.

Maintaining a Unique Relationship with Providers

Prevention

Prevention services are the use of evidence-based approaches to create or enhance environmental conditions within communities, families, schools, and workplaces that protect individuals from substance misuse and. In FY24, DAODAS continued to work with local providers to emphasize prevention programs associated with the reduction of underage drinking. In Fiscal Year 2023 (FY23) (*the most recent data available*), the state’s **Alcohol Enforcement Teams (AETs)** – which focus on community coalition development and maintenance, merchant education, and law enforcement partnerships to reduce underage drinking activities – reported conducting 4,084 alcohol compliance checks, resulting in an effective buy rate of 8.9%. Also in FY23, the AETs reported operating 722 public safety checkpoints, issuing 118 DUI citations, and dispersing 28 parties, which resulted in 60 tickets and 137 youth being referred into an Alcohol Education Diversion Program.

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As a result of intensive prevention programming throughout the state, **youth use rates for all substances continued to decline**. As reported from the Communities That Care Survey conducted in Spring 2024, self-reported past-30-day use among South Carolina high school youth was as follows:

- use of alcohol decreased to 7.4% (9.8% in 2022);
- use of marijuana down to 4.9% (8.9% in 2022);
- use of cigarettes decreased to 0.9% (1.3% in 2022);
- use of vaping products down to 5.8% (13.4% in 2022); and
- prescription drug use decreased to 2.2% (2.8% in 2022).

DAODAS and its local partners also participated in the federally required **Youth Access to Tobacco Study** to reduce South Carolina youth’s ability to purchase tobacco products. The department documented a buy rate of 10.7% in Federal Fiscal Year 2024. In addition, AETs reported conducting 301 tobacco compliance checks, resulting in an effective buy rate of 9.3%.

Intervention

Intervention services for individuals charged with Driving Under the Influence and Boating Under the Influence are provided through the **Alcohol and Drug Safety Action Program (ADSAP)**. Because thousands of South Carolinians are killed or injured each year in alcohol- or other drug-related crashes, ADSAP works with offenders to reduce the number of crashes that result in death, injury, or property damage. ADSAP services are certified by DAODAS and are available in each of the state’s 46 counties. In FY24, 13,031 individuals enrolled in ADSAP.

In October 2023, DAODAS launched the **Law Enforcement Assisted Diversion (LEAD) Program**, a collaborative partnership between DAODAS, Clemson University, and six law enforcement agencies to reduce criminal justice involvement in individuals who require treatment for substance use and co-occurring disorders. LEAD is a pre-arrest diversion/deflection program led by law enforcement officers to help divert individuals into community-based treatment services in lieu of arrest via a warm handoff to a case manager. Officers make referrals into LEAD; the only requirement for the participant is an initial meeting with a case manager, and participation is voluntary.

To date, each law enforcement site has hired a full-time program manager and has trained officers who will be making referrals. DAODAS and Clemson’s Center for Addiction and Mental Health Research (CAMHR) and Center for Criminal Justice and Social Research completed initial site visits in 2024 to check on the progress of the individual programs and obtain baseline data to start the evaluation process. All sites have been in communication and working with their respective local treatment and recovery organizations to start providing treatment and case management services to diverted individuals at the beginning of Fiscal Year 2025. The CAMHR has begun hosting office hours and a learning collaborative each month that offers technical assistance and training opportunities.

DAODAS also provides funding to the solicitor’s offices in the 6th Judicial Circuit (Lancaster, Chester, and Fairfield counties)and the 14th Circuit (Allendale, Beaufort, Colleton, Hampton, and Jasper counties) for **Adult Treatment Court Programs** (i.e., drug courts). Both circuits are

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following Adult Treatment Court Best Practice Standards as recommended by All Rise, formerly known as the National Association of Drug Court Professionals. As of June 30, 2024, the 6th Circuit had 29 drug court clients, and the Chester County program held its first graduation on June 20, with two clients completing the program. During FY24, the 14th Circuit had 105 clients, 41 of whom graduated. Representatives of both circuits will be attending All Rise’s national conference – RISE25 – in 2025 to receive training on the new best practice standards.

Treatment

DAODAS works with the state’s county alcohol and drug authorities as they offer a **full spectrum of treatment services** to meet the individual needs of patients who come through their doors. These services range from educational and individual therapies to withdrawal management and inpatient care. In FY23 (*most recent data available*), 46,173 individuals received treatment and were discharged from services. When surveyed following discharge from services, the proportion of these patients who reported past-30-day use of alcohol decreased by 27%; the proportion who reported past-30-day use of *any* substance decreased by 30%; and the proportion who reported past-30-day employment increased by 74%.

The department also partners with 28 opioid treatment programs around the state, serving over 8,000 patients per day. DAODAS’ relationships with various South Carolina hospitals have expanded the availability of addictions treatment for hospital patients while in care and during transition to outpatient services with external SUD providers.

Recovery

As part of the department’s emphasis on working with recovery community organizations (RCOs), DAODAS has supported the formation of **four faith-based RCOs** that offer a full spectrum of recovery support services across seven counties.

The department has also championed the **safe recovery housing movement** by leading the way in ensuring that recovery homes meet national standards of quality, including support for S445, which established a voluntary certification program for recovery houses in South Carolina. S445 was passed by the 125th General Assembly in May 2024, and DAODAs will be implementing the program in Fiscal Year 2025, building on efforts by the S.C. Association of Recovery Residences (SCARR), which has implemented a robust strategy of certification for recovery houses using standards established by the National Association of Recovery Residences. (At the end of FY24, SCARR had 45 certified residences with a total of 642 beds, with six more recovery houses in various stages of the certification process.)

DAODAS and **Oxford House Inc.** have formed an ongoing partnership that has increased access to and availability of recovery houses in South Carolina. With a total of 769 beds, as of June 30, 2024, there were 105 Oxford Houses in our state – 70 for men, 20 for women, 15 for women with dependent children, and four that serve men with dependent children. Oxford House Inc. reports that individuals prescribed medication for an opioid use disorder are welcome in all homes.

Also, through Lutheran Services of the Carolinas, DAODAS helps support the only SCARR-certified **Collegiate Recovery Home** in South Carolina, WeCo Cottage in West Columbia. WeCo

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Cottage offers four beds for college students in recovery from SUDs and partners with the Collegiate Recovery Programs at Allen University, Benedict College, and the University of South Carolina to offer their students safe and affordable recovery housing. Throughout the year, WeCo Cottage holds house meetings, recovery meetings, and other special events to welcome the community and help their residents feel safe and secure.

South Carolina Faces and Voices of Recovery, now being rebranded as the **S.C. Alliance of Recovery Community Organizations (SC ARCO)**, has undergone a strategic planning effort to refocus its efforts on building sustainable non-profit RCOs. In FY24, SC ARCO helped craft the new S.C. Certified Peer Support Specialist (CPSS) Certification Curriculum that will be utilized at five SC ARCO training locations approved by Addiction Professionals of South Carolina. These five training sites certify over 250 CPSS annually to enter the SUD workforce in South Carolina.

Risk Assessment and Mitigation

Data and information on substance use trends are continuously monitored by DAODAS.

Should the agency not reach its goal of delivering efficient and effective SUD prevention, intervention, treatment, and recovery services, or should it fall short in addressing the evolving drug crisis, the negative impact on the citizens of South Carolina would include an upsurge in overall mortality, increased healthcare costs, a rise in underage drinking and impaired-driving crashes, and an increase in cases of addiction that would impact the workforce, the economic engine of the state, and ultimately the quality of life of all South Carolinians.

As noted above, access to appropriate levels of SUD care, community-based prevention, targeted outreach, evidence-based interventions, and recovery support programs will be a strategic direction of the department over the next five years. DAODAS provides healthcare coverage for the uninsured and underinsured experiencing addiction, and its provider network **served more than 46,000 citizens in FY24**. The General Assembly can support investments that strengthen the continuum of substance use services and programs in South Carolina to reduce vulnerability of the addiction service infrastructure.

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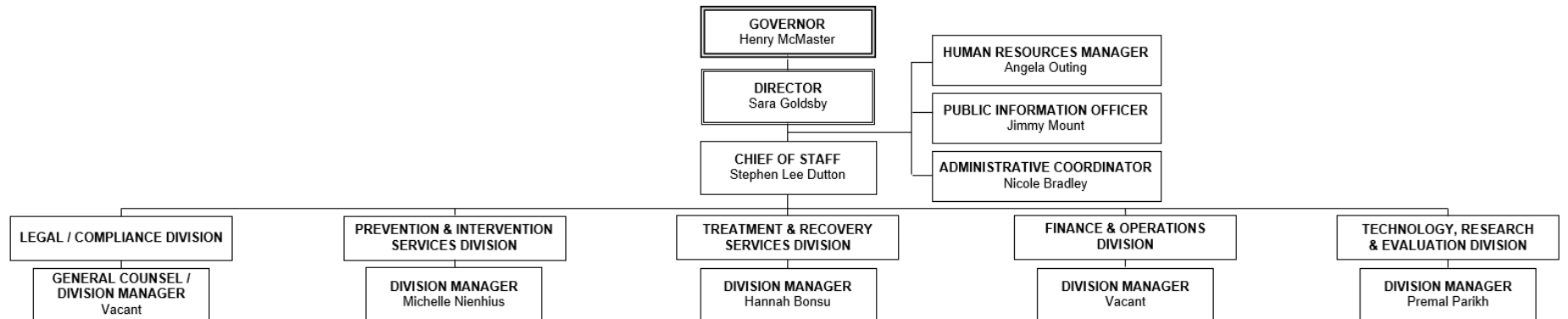
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AGENCY ORGANIZATIONAL CHART

South Carolina Department of Alcohol and Other Drug Abuse Services (09/09/24)



2024

Reorganization and Compliance

as submitted for the Accountability Report by:
J200 - Department Of Alcohol & Other Drug Abuse Services

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Agency Mission	Adopted in:
The mission of DAODAS is to ensure the availability and quality of a continuum of substance use services, thereby improving the health status, safety, and quality of life of individuals, families, and communities across South Carolina.	2022

Agency Vision	Adopted in:
DAODAS will be an innovative leader, facilitating effective services and compassionate care through a network of community partnerships and strategic collaborations.	2022

Recommendations for reorganization requiring legislative change:
The South Carolina Legislature is considering a redesign of several health agencies, of which DAODAS would be a part of the proposed reorganization.

Agency intentions for other major reorganization to divisions, departments, or programs to allow the agency to operate more effectively and efficiently in the succeeding fiscal year:
None

Significant events related to the agency that occurred in FY2024

Description of Event	Start	End	Agency Measures Impacted	Other Impacts
Foundation of the Center of Excellence in Addiction (COE)	July	June	Increase the Number of Patients receiving Opioid Disorder Treatment Services by 5%	
Comprehensive Opioid, Stimulant Use Program (LEAD)	July	June	Increase Criminal Justice System referrals to SUD treatment to 14,000	Decrease the number of individuals with substance use and addiction out of the jail system.
UA HUD - Provides Housing Vouchers for individuals in recovery from SUD to receive up to two years of stable quality housing.	June	July	To obtain and maintain a 75% occupancy rate (over each 90-day period) in Oxford homes	Assist both Individuals and Veterans and College Attendees to seek and live in sober housing.

Is the agency in compliance with S.C. Code Ann. § 2-1-220, which requires submission of certain reports to the Legislative Services Agency for publication online and the State Library? (See also S.C. Code Ann. § 60-2-20).
Yes

Reason agency is out of compliance: (if applicable)

Is the agency in compliance with various requirements to transfer its records, including electronic ones, to the Department of Archives and History? See the Public Records Act (S.C. Code Ann. § 30-1-10 through 30-1-180) and the South Carolina Uniform Electronic Transactions Act (S.C. Code Ann. § 26-6-10 through 26-10-210).
Yes

Does the law allow the agency to promulgate regulations?
No

Law number(s) which gives the agency the authority to promulgate regulations:	
Has the agency promulgated any regulations?	No
Is the agency in compliance with S.C. Code Ann. § 1-23-120 (J), which requires an agency to conduct a formal review of its regulations every five years?	Yes
(End of Reorganization and Compliance Section)	

FY2024

Strategic Plan Results

as submitted for the Accountability Report by:

J200 - Department Of Alcohol & Other Drug Abuse Services

Goal 1 Create an Accessible Continuum of Effective Services within Each Community in 2019

Goal 2 Become a Leader in the Delivery of World Class Quality Services by 2020

Goal 3 Become a Leader in Collaboration and Integration

Perf. Measure Number	Description	Base	Target	Actual	Value Type	Desired Outcome	Time Applicable	Calculation Method	Data Source	Data Location	Stakeholder Need Satisfied	Primary Stakeholder	State Funded Program Number Responsible	Notes
1.1 Reduce Youth and Young Adult use of Alcohol, Tobacco and other Drugs														State Objective: Healthy and Safe Families
1.1.1	Increase the Number of Individuals who receive Prevention Services by 1%	212,631	214,757	291,335	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Single Service Count	Impact / DAODAS Prevention Data System	DAODAS Division of Prevention	The public and local providers	The public and local providers	4502.000000.000	
1.1.2	Maintain at least 250 DAODAS Supported Alcohol Enforcement Team Public Safety Checkpoints	396	250	722	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of local entities participating in checkpoints	DAODAS Mosaic Reporting	DAODAS Division of Prevention	Prevention Services are aimed at reducing first use among youth and therefore lifetime use and abuse. Decreases Youth Mortality Rate.	Schools and local providers	4502.000000.000	
1.1.3	Reduce Underage Drinking to 20% or under	9.80%	20%	7%	Percent	equal to or less than	State Fiscal Year (July 1 - June 30).	Number that self-reported as current alcohol use between the 6th - 12th grades, surveyed by the SC CTC 2024	Communities That Care, Pacific Institute for Research and Evaluation	DAODAS Division of Prevention	Prevention Services are aimed at reducing first use among youth and therefore lifetime use and misuse.	Schools and local providers	4502.000000.000	YRBS was discontinued for this year but will start up in 2025. So data in 2026 will be available. Switched from YRBS to CTC 2024.
1.1.4	Reduce Underage Alcohol Buy Rate to under 10%	10.00%	10%	8.90%	Percent	equal to or less than	State Fiscal Year (July 1 - June 30).	# of checks that failed over the # of compliance checks in the Prevention Outcomes Annual Report, PIRE	DAODAS Data Prevention System	DAODAS Division of Prevention	Prevention Services are aimed at reducing first use among youth and therefore lifetime use and abuse.	The public and local providers	4502.000000.000	Given that CTC 2024 was used for Performance Measure Number 1.1.3, I used this as well given it has a similar metric measured.
1.1.5	Reduce Alcohol-involved Car Crashes by 1%	30%	29.30%	30%	Percent	equal to or less than	State Fiscal Year (July 1 - June 30).	number of deaths in crashes where BAC is .08% or greater / total number of deaths in crashes	Fatality Analysis Reporting System (FARs) / NHTSA Database	Online database	Prevention Services are aimed at reducing first use among youth and therefore lifetime use and abuse. Decreases Youth Mortality Rate.	The public and local providers	4502.000000.000	
1.1.6	Keep underage access to tobacco (Smar) to 10% or less	10.60%	10%	11%	Percent	equal to or less than	Federal Fiscal Year (October 1 - September 30)	Number of violations over the total number observed	Youth Access to Tobacco Study / DAODAS	DAODAS Division of Prevention	Prevention of Tobacco Sales are aimed at reducing first use among youth and therefore lifetime use and abuse. Decreases Adult Mortality Rate.	The public and local providers	4502.000000.000	Changed the metric of the study, needed to increase age to youth buyers and include 18, 19, and 20 year olds.
1.1.7	Keep Underage Tobacco Use to 9% or less	3.30%	9%	1%	Percent	equal to or less than	State Fiscal Year (July 1 - June 30).	Number that self-reported as having smoked a cigarette in the past 30 days/ total number surveyed by the SC YRBS	Youth Risk Behavior Survey	SC Department of Education	Prevention of Tobacco Sales are aimed at reducing first use among youth and therefore lifetime use and abuse. Decreases Adult Mortality Rate.	Schools and local providers	4502.000000.000	
1.2 Increase Access to a Continuum of Evidence Based Substance Use Disorder Services														State Objective: Healthy and Safe Families

Perf. Measure Number	Description	Base	Target	Actual	Value Type	Desired Outcome	Time Applicable	Calculation Method	Data Source	Data Location	Stakeholder Need Satisfied	Primary Stakeholder	State Funded Program Number Responsible	Notes
1.2.1	Increase the Number of Unduplicated Patients Served by 5%	46,584	5%	46,713	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of Unduplicated Patients Served	Internal Records	DAODAS EHR	Provision of treatment services to South Carolinians of all ages increases recovery rates and impacts a range of morbidity and mortality statistics, as well as economic output indicators.	The public and local providers	4502.000000.000	
1.2.2	Increase the number of pregnant women who access treatment and recovery services by 5%	686	5%	636	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of Unduplicated Patients Served	Internal Records	DAODAS EHR	Provision of treatment services and coordinated prenatal care impacts the Infant Mortality Rate, as well as increase recovery rates.	The public and local providers	4502.000000.000	
1.2.3	Increase Criminal Justice System referrals to SUD treatment to 14,000	10,083	14,000	9,572	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of referrals	Internal Records	DAODAS EHR	Provision of treatment services to inmates and parolees increases changes of recovery and decreases recidivism.	SCDC	4502.000000.000	
1.2.4	Provide additional Peer Support Trainings to increase the number of Peer Support Specialists by 5%	823	864	2,216	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of training offered	Internal Records	DAODAS Division of Treatment	Peer Support Services is an industry standard the assists individuals in learning recovery principles and maintain sobriety; increases recovery outcomes.	Recovery Community and Local Providers	4502.000000.000	
1.2.5	Maintain at least 5 Collegiate Recovery Organizations in the state	7	5	5	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of programs	Internal Records	DAODAS Division of Treatment	Expanding Recovery Programs increases recovery outcomes; impacts local communities	Colleges	4502.000000.000	
1.2.6	Maintain the number of unduplicated persons connecting to the Recovery Community organizations annually at 3,500 or more	141,114	35,000	31,268	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of unduplicated persons connecting	Internal Records	DAODAS Division of Treatment	Expanding Recovery Support for individuals connecting with recovery communities	Recovery Community and Local Providers	9806.550000X000	
1.2.7	Maintain the 17 certified recovery residences	17	17	45	Count	equal to or greater than	Federal Fiscal Year (October 1 - September 30)	Number of residences	Internal Records	DAODAS Division of Treatment	Expanding access to certified recovery residences to increase recovery outcomes and impact local communities	Recovery Community and Local Providers	9806.550000X000	
1.2.8	Implement MAT diversion programs in 3 counties	7	7	6	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of programs	Internal records	DAODAS Division of Legal Compliance	Recovery Community and Local Providers	Expanding best practices with treatment courts increases recovery outcomes	9806.550000X000	Began in late FY24 with the goal of expansion during FY25.

Perf. Measure Number	Description	Base	Target	Actual	Value Type	Desired Outcome	Time Applicable	Calculation Method	Data Source	Data Location	Stakeholder Need Satisfied	Primary Stakeholder	State Funded Program Number Responsible	Notes
1.2.9	To obtain and maintain a 75% occupancy rate (over each 90-day period) in Oxford homes	80.69%	75%	85%	Percent	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of beds occupied over total number of beds	Internal records	DAODAS Division of Treatment	Recovery Community and Local Providers	Expanding Recovery Support and access to transitional Housing such as an oxford house, increases recovery outcomes; impacts local communities and increases the ability for an individual to become gainfully employed.	4502.000000.000	
1.2.10	To maintain the 10 Recovery Community Organizations across the state	17	10	14	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of Recovery Community Organizations open across the state	Internal records	DAODAS Division of Treatment	Recovery Community and Local Providers	Expanding Recovery Support and access to continuum of care	4502.000000.000	
1.3 Increase Services to Patients With Opioid Use Disorder													State Objective: Healthy and Safe Families	
1.3.1	Increase the Number of Patients receiving Opioid Disorder Treatment Services by 5%	5,057	5%	7,778	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of Unduplicated Patients Served	Entered Electronic Health Record	DAODAS Division of Technology, Research & Evaluation	Expanding Opiate Disorder services saves lives; increases recovery opportunities and impacts the state's economic output.	The public and local providers	9806.550000X000	
1.3.2	Increase the Number of Patients Receiving MAT Services by 5%	5,655	5%	5,152	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of Unduplicated Patients Served	Entered Electronic Health Record	DAODAS Division of Technology, Research & Evaluation	Expanding Opiate Disorder services saves lives; increases recovery opportunities and impacts the state's economic output.	The public and local providers	9806.550000X000	
1.3.3	Increase the Number of Professional First Responders Trained in Opioid Reversal Protocols using Narcan to 12,775	16,549	1,879	2,945	Count	equal to or greater than	Federal Fiscal Year (October 1 - September 30)	Number trained	LEON Project/ROLL Project	DAODAS Division of Prevention	Reverses Drug Overdose; Saves Lives; Increases Treatment Referrals; Increases Recovery Prospects.	Law enforcement, first responders	9806.540000X000	1587 (Law Enforcement) + 1358 (Firefighters) = 2945 Just for this year Calendar 23
1.3.4	Increase coordination with the S.C. Department of Corrections (SCDC) to enroll inmates in opioid recovery services by 10% as measured by number of inmates enrolled.	300	330	1,649	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of inmates enrolled	Internal Records	DAODAS Division of Treatment	Increases Treatment Referrals; Increases Recovery Prospects.	Correctional Facilities	9806.550000X000	
1.3.5	Maintain the 241 Prescription Drug Drop Boxes	241	241	241	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of drop boxes	Just Plain Killers	DAODAS Division of Prevention	Increases Prescription Drug Prevention Efforts; Increases Disposal of Opiate and Other Harmful Drugs; Decreases Demand for Opiates.	The public and local providers	9806.540000X000	
1.3.6	Increase the number of Narcan administrations through LEON and ROLL by 5%	1,878	1,971	1,815	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of administrations through grant programs.	LEON Project/ROLL Project	DAODAS Division of Prevention	Reverses Drug Overdose; Saves Lives; Increases Treatment Referrals; Increases Recovery Prospects.	The public, first responders	9806.540000X000	Unknown why numbers are not meeting target.
1.3.7	Maintain inducting at least 500 ED patients on buprenorphine in pilot sites per fiscal year.	500	500	550	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of unduplicated patients served through pilot sites.	Internal Records	DAODAS Division of Treatment	Expanding Opiate Disorder services saves lives; increases recovery opportunities and impacts the state's economic output.	Hospitals	9806.550000X000	

Perf. Measure Number	Description	Base	Target	Actual	Value Type	Desired Outcome	Time Applicable	Calculation Method	Data Source	Data Location	Stakeholder Need Satisfied	Primary Stakeholder	State Funded Program Number Responsible	Notes	
1.3.8	Maintain availability of the 31 Tele-Health providers across the state		31	31	31	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of providers	MAT Report	DAODAS Division of Treatment	Telehealth Services Increases Access, Diagnosis and Treatment options for a range of SUD patients and telehealth-capable healthcare entities.	local providers and hospitals	9806.550000X000	
1.3.9	Increase the number of agencies that are designated by DAODAS to be community distributors of naloxone 105		102	105	129	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of agencies	Internal Records	DAODAS Divisions of Prevention	Reverses Drug Overdose; Saves Lives; Increases Treatment Referrals; Increases Recovery Prospects.	local providers	9806.540000X000	
2.1 Reduce Substance Use Disorder in South Carolina													State Objective: Public Infrastructure and Economic Development		
2.1.1	Increase Effectiveness of Treatment Programs to 35% / Decrease Use		35%	35%	30%	Percent	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of those who currently use substances over all those who are discharged from treatment	Electronic Health Record - Local Provider Report	DAODAS EHR	Provides Coverage for uninsured individuals increasing access to treatment and recovery assets.	The public and local providers	4502.000000.000	CareLogic counted discharges at administration, which inflated the denominator for the proportion we see here.
2.1.2	Increase Effectiveness of Treatment Programs by 1% / Increase Employment		55%	55%	74%	Percent	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of those who currently have employment over all those who are discharged from treatment	National Outcome Measures	DAODAS EHR	Impacts individual and family economic stability; Impacts South Carolina economic outputs.	The public and local providers	4502.000000.000	
2.1.3	Maintain 90 day length-of-stay for 50% of individuals utilizing level 1 outpatient services		50%	50%	59%	Percent	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of unduplicated patients completing 90 day length of stay / total number of unduplicated patients	Electronic Health Record - Local Provider Report / Monthly	DAODAS EHR	Longer treatment stays leads to better clinical outcomes	The public and local providers	4502.000000.000	
2.1.4	Maintain percentage of patients completing treatment plan of at least 40%		40%	40%	44%	Percent	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of unduplicated patients completing treatment / total number of unduplicated patients	DAODAS FY Discharge Outcomes Report	DAODAS EHR	Completion of treatment leads to lower rates of re-admission.	The public and local providers	4502.000000.000	
2.2 Workforce Development													State Objective: Public Infrastructure and Economic Development		
2.2.1	Increase training opportunities in evidence based programs in prevention, treatment and recovery by 5%		43	45	48	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of trainings	State Baseline Measure	Administration	Training and Retention of qualified counselor are essential to prevention, treatment and recovery efforts.	local providers and state partners	4502.000000.000	
2.2.2	Maintain having at least 70 individuals certified to provide preventative services in South Carolina		70	70	67	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of individuals certified	South Carolina Association of Prevention Professionals and Advocates (SCAPPA)	Online database	Training and Retention of qualified counselors are essential to prevention and overall efforts.	local providers and state partners	4502.000000.000	
2.2.3	Maintain the number of individuals certified to provide treatment services in South Carolina to at least 2,000		2,141	2,000	2,067	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of individuals certified	South Carolina Association of Alcoholism and Drug Abuse Counselors (SCAADAC)	Online database	Training and Retention of qualified counselors are essential to treatment and overall efforts.	local providers and state partners	4502.000000.000	
3.1 Increase Integration Efforts with Local and State Partners													State Objective: Government and Citizens		
3.1.1	Maintain the 95 of state and local private and public partnerships for targeting substance use disorder		95	95	144	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of partnerships	Internal Records	Administration	Building a strong continuum of prevention, treatment and recovery providers is essential to increasing access to recovery and maintaining sobriety.	local providers and state partners	9806.550000X000	
3.2 Increase Services to the Uninsured													State Objective: Government and Citizens		

Perf. Measure Number	Description	Base	Target	Actual	Value Type	Desired Outcome	Time Applicable	Calculation Method	Data Source	Data Location	Stakeholder Need Satisfied	Primary Stakeholder	State Funded Program Number Responsible	Notes
3.2.1	Increase the number of uninsured individuals receiving state funded assessments by 5%	8,500	8,925	8,747	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of assessments	Entered Electronic Health Record / Monthly	DAODAS EHR	Provides the department a measure of services to the uninsured and underinsured, a federal priority.	The public and local providers	4502.000000.000	
3.3 Increase Integration with Physical and Specialty Healthcare Providers													State Objective: Government and Citizens	
3.3.1	Use Screening, Brief Intervention and Referral to Treatment (SBIRT) as the standard of care at targeted Emergency Department Sites to fully screened (FS) 500 individuals for SUDs annually	310	500	1,977	Count	equal to or greater than	Federal Fiscal Year (October 1 - September 30)	Single Service Count	Internal Records	DAODAS Division of Treatment	Increases Access to Treatment Services and thus recovery opportunities.	Hospitals	4502.000000.000	
3.3.2	Use SBIRT as the standard of care at targeted Emergency Department Sites to refer 100 individuals to treatment (RT) for SUDs annually	100	100	496	Count	equal to or greater than	Federal Fiscal Year (October 1 - September 30)	Number of referrals	Internal Records	DAODAS Division of Treatment	Increases Access to Treatment Services and thus recovery opportunities.	Hospitals	4502.000000.000	
3.3.3	Maintain the Psychiatry residency program, 11 Professionals, to train mental health professionals in South Carolina and increase access to mental health care.	11	11	11	Count	equal to or greater than	Federal Fiscal Year (October 1 - September 30)	Number of providers	Internal Records	DAODAS Division of Treatment	Increases Access to Treatment Services and thus recovery opportunities.	Hospitals	4502.000000.000	

FY2025

Strategic Plan Development

as submitted for the Accountability Report by:

J200 - Department Of Alcohol & Other Drug Abuse Services

- Goal 1 Ensure access to a continuum of addiction treatment and recovery services.
- Goal 2 Enhance state and community-based substance use prevention and intervention services.
- Goal 3 Promote and ensure quality of addiction programs and services in South Carolina.

Perf. Measure Number	Description	Base	Target	Value Type	Desired Outcome	Time Applicable	Calculation Method	Data Source	Data Location	Stakeholder Need Satisfied	Primary Stakeholder	State Funded Program Number Responsible	Notes
1.1 Reduce Youth and Young Adult use of Alcohol, Tobacco and other Drugs													State Objective: Healthy and Safe Families
1.1.1	Increase the Number of Individuals who receive Prevention Services by 1%	212,631	214,757	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Single Service Count	Impact / DAODAS Prevention Data System	DAODAS Division of Prevention	The public and local providers	The public and local providers	4502.000000.000	
1.1.2	Maintain at least 250 DAODAS Supported Alcohol Enforcement Team Public Safety Checkpoints	396	250	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of local entities participating in checkpoints	DAODAS Mosaic Reporting	DAODAS Division of Prevention	Prevention Services are aimed at reducing first use among youth and therefore lifetime use and abuse. Decreases Youth Mortality Rate.	Schools and local providers	4502.000000.000	
1.1.3	Reduce Underage Drinking to 20% or under	19.20%	20%	Percent	equal to or less than	State Fiscal Year (July 1 - June 30).	Number that self-reported as current alcohol use between the 6th - 12th grades, surveyed by the SC CTC 2024	Communities That Care, Pacific Institute for Research and Evaluation	DAODAS Division of Prevention	Prevention Services are aimed at reducing first use among youth and therefore lifetime use and misuse.	Schools and local providers	4502.000000.000	
1.1.4	Reduce Underage Alcohol Buy Rate to under 10%	10%	10%	Percent	equal to or less than	State Fiscal Year (July 1 - June 30).	# of checks that failed over the # of compliance checks in the Prevention Outcomes Annual Report, PIRE	DAODAS Data Prevention System	DAODAS Division of Prevention	Prevention Services are aimed at reducing first use among youth and therefore lifetime use and abuse.	The public and local providers	4502.000000.000	
1.1.5	Reduce Alcohol-involved Car Crashes by 1%	30%	29.30%	Percent	equal to or less than	State Fiscal Year (July 1 - June 30).	number of deaths in crashes where BAC is .08% or greater / total number of deaths in crashes	Fatality Analysis Reporting System (FARs) / NHTSA Database	Online database	Prevention Services are aimed at reducing first use among youth and therefore lifetime use and abuse. Decreases Youth Mortality Rate.	The public and local providers	4502.000000.000	
1.1.6	Keep underage access to tobacco (Synar) to 10% or less	10.60%	10%	Percent	equal to or less than	Federal Fiscal Year (October 1 - September 30)	Number of violations over the total number observed	Youth Access to Tobacco Study / DAODAS	DAODAS Division of Prevention	Prevention of Tobacco Sales are aimed at reducing first use among youth and therefore lifetime use and abuse. Decreases Adult Mortality Rate.	The public and local providers	4502.000000.000	
1.1.7	Keep Underage Tobacco Use to 9% or less	3.30%	9%	Percent	equal to or less than	State Fiscal Year (July 1 - June 30).	Number that self-reported as having smoked a cigarette in the past 30 days/ total number surveyed by the SC YRBS	Youth Risk Behavior Survey	SC Department of Education	Prevention of Tobacco Sales are aimed at reducing first use among youth and therefore lifetime use and abuse. Decreases Adult Mortality Rate.	Schools and local providers	4502.000000.000	
1.2 Increase Access to a Continuum of Evidence Based Substance Use Disorder Services													State Objective: Healthy and Safe Families

Perf. Measure Number	Description	Base	Target	Value Type	Desired Outcome	Time Applicable	Calculation Method	Data Source	Data Location	Stakeholder Need Satisfied	Primary Stakeholder	State Funded Program Number Responsible	Notes
1.2.1	Increase the Number of Unduplicated Patients Served by 5%	46,584	5%	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of Unduplicated Patients Served	Internal Records	DAODAS EHR	Provision of treatment services to South Carolinians of all ages increases recovery rates and impacts a range of morbidity and mortality statistics, as well as economic output indicators.	The public and local providers	4502.000000.000	
1.2.2	Increase the number of pregnant women who access treatment and recovery services by 5%	686	5%	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of Unduplicated Patients Served	Internal Records	DAODAS EHR	Provision of treatment services and coordinated prenatal care impacts the Infant Mortality Rate, as well as increase recovery rates.	The public and local providers	4502.000000.000	
1.2.3	Increase Criminal Justice System referrals to SUD treatment to 14,000	10,083	14,000	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of referrals	Internal Records	DAODAS EHR	Provision of treatment services to inmates and parolees increases changes of recovery and decreases recidivism.	SCDC	4502.000000.000	
1.2.4	Provide additional Peer Support Trainings to increase the number of Peer Support Specialists by 5%	823	864	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of training offered	Internal Records	DAODAS Division of Treatment	Peer Support Services is an industry standard that assists individuals in learning recovery principles and maintain sobriety; increases recovery outcomes.	Recovery Community and Local Providers	4502.000000.000	
1.2.5	Maintain at least 5 Collegiate Recovery Organizations in the state	7	5	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of programs	Internal Records	DAODAS Division of Treatment	Expanding Recovery Programs increases recovery outcomes; impacts local communities	Colleges	4502.000000.000	
1.2.6	Maintain the number of unduplicated persons connecting to the Recovery Community organizations annually at 3,500 or more	141,114	35,000	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of unduplicated persons connecting	Internal Records	DAODAS Division of Treatment	Expanding Recovery Support for individuals connecting with recovery communities	Recovery Community and Local Providers	9806.550000X000	
1.2.7	Maintain the 17 certified recovery residences	17	17	Count	equal to or greater than	Federal Fiscal Year (October 1 - September 30)	Number of residences	Internal Records	DAODAS Division of Treatment	Expanding access to certified recovery residences to increase recovery outcomes and impact local communities	Recovery Community and Local Providers	9806.550000X000	
1.2.8	Implement MAT diversion programs in 3 counties	7	7	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of programs	Internal records	DAODAS Division of Legal Compliance	Recovery Community and Local Providers	Expanding best practices with treatment courts increases recovery outcomes	9806.550000X000	
1.2.9	To obtain and maintain a 75% occupancy rate (over each 90-day period) in Oxford homes	80.69%	75%	Percent	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of beds occupied over total number of beds	Internal records	DAODAS Division of Treatment	Recovery Community and Local Providers	Expanding Recovery Support and access to transitional Housing such as an oxford house, increases recovery outcomes; impacts local communities and increases the ability for an individual to become gainfully employed.	4502.000000.000	

Perf. Measure Number	Description	Base	Target	Value Type	Desired Outcome	Time Applicable	Calculation Method	Data Source	Data Location	Stakeholder Need Satisfied	Primary Stakeholder	State Funded Program Number Responsible	Notes
1.2.10	To maintain the 10 Recovery Community Organizations across the state	17	10	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of Recovery Community Organizations open across the state	Internal records	DAODAS Division of Treatment	Recovery Community and Local Providers	Expanding Recovery Support and access to continuum of care	4502.000000.000	
1.3 Increase Services to Patients With Opioid Use Disorder													
State Objective: Healthy and Safe Families													
1.3.1	Increase the Number of Patients receiving Opioid Disorder Treatment Services by 5%	5057	0.05	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of Unduplicated Patients Served	Entered Electronic Health Record	DAODAS Division of Technology, Research & Evaluation	Expanding Opiate Disorder services saves lives; increases recovery opportunities and impacts the state's economic output.	The public and local providers	9806.550000X000	
1.3.2	Increase the Number of Patients Receiving MAT Services by 5%	5,655	5%	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of Unduplicated Patients Served	Entered Electronic Health Record	DAODAS Division of Technology, Research & Evaluation	Expanding Opiate Disorder services saves lives; increases recovery opportunities and impacts the state's economic output.	The public and local providers	9806.550000X000	
1.3.3	Increase the Number of Professional First Responders Trained in Opioid Reversal Protocols using Narcan to 12,775	16,549	1,879	Count	equal to or greater than	Federal Fiscal Year (October 1 - September 30)	Number trained	LEON Project/ROLL Project	DAODAS Division of Prevention	Reverses Drug Overdose; Saves Lives; Increases Treatment Referrals; Increases Recovery Prospects.	Law enforcement, first responders	9806.540000X000	
1.3.4	Increase coordination with the S.C. Department of Corrections (SCDC) to enroll inmates in opioid recovery services by 10% as measured by number of inmates enrolled.	300	330	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of inmates enrolled	Internal Records	DAODAS Division of Treatment	Increases Treatment Referrals; Increases Recovery Prospects.	Correctional Facilities	9806.550000X000	
1.3.5	Maintain the 241 Prescription Drug Drop Boxes	241	241	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of drop boxes	Just Plain Killers	DAODAS Division of Prevention	Increases Prescription Drug Prevention Efforts; Increases Disposal of Opiate and Other Harmful Drugs; Decreases Demand for Opiates.	The public and local providers	9806.540000X000	
1.3.6	Increase the number of Narcan administrations through LEON and ROLL by 5%	1,878	1,971	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of administrations through grant programs.	LEON Project/ROLL Project	DAODAS Division of Prevention	Reverses Drug Overdose; Saves Lives; Increases Treatment Referrals; Increases Recovery Prospects.	The public, first responders	9806.540000X000	
1.3.7	Maintain inducting at least 500 ED patients on buprenorphine in pilot sites per fiscal year.	500	500	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of unduplicated patients served through pilot sites.	Internal Records	DAODAS Division of Treatment	Expanding Opiate Disorder services saves lives; increases recovery opportunities and impacts the state's economic output.	Hospitals	9806.550000X000	
1.3.8	Maintain availability of the 31 Tele-Health providers across the state	31	31	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of providers	MAT Report	DAODAS Division of Treatment	Telehealth Services Increases Access, Diagnosis and Treatment options for a range of SUD patients and telehealth-capable healthcare entities.	local providers and hospitals	9806.550000X000	
1.3.9	Increase the number of agencies that are designated by DAODAS to be community distributors of naloxone 105	102	105	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of agencies	Internal Records	DAODAS Divisions of Prevention	Reverses Drug Overdose; Saves Lives; Increases Treatment Referrals; Increases Recovery Prospects.	local providers	9806.540000X000	
2.1 Reduce Substance Use Disorder in South Carolina													
State Objective: Public Infrastructure and Economic Development													

Perf. Measure Number	Description	Base	Target	Value Type	Desired Outcome	Time Applicable	Calculation Method	Data Source	Data Location	Stakeholder Need Satisfied	Primary Stakeholder	State Funded Program Number Responsible	Notes	
2.1.1	Increase Effectiveness of Treatment Programs to 35% / Decrease Use		35%	35%	Percent	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of those who currently use substances over all those who are discharged from treatment	Electronic Health Record - Local Provider Report	DAODAS EHR	Provides Coverage for uninsured individuals increasing access to treatment and recovery assets.	The public and local providers	4502.000000.000	
2.1.2	Increase Effectiveness of Treatment Programs by 1% / Increase Employment		55%	55%	Percent	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of those who currently have employment over all those who are discharged from treatment	National Outcome Measures	DAODAS EHR	Impacts individual and family economic stability; Impacts South Carolina economic outputs.	The public and local providers	4502.000000.000	
2.1.3	Maintain 90 day length-of-stay for 50% of individuals utilizing level 1 outpatient services		50%	50%	Percent	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of unduplicated patients completing 90 day length of stay / total number of unduplicated patients	Electronic Health Record - Local Provider Report / Monthly	DAODAS EHR	Longer treatment stays leads to better clinical outcomes	The public and local providers	4502.000000.000	
2.1.4	Maintain percentage of patients completing treatment plan of at least 40%		40%	40%	Percent	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of unduplicated patients completing treatment / total number of unduplicated patients	DAODAS FY Discharge Outcomes Report	DAODAS EHR	Completion of treatment leads to lower rates of re-admission.	The public and local providers	4502.000000.000	
2.2	Workforce Development										State Objective: Public Infrastructure and Economic Development			
2.2.1	Increase training opportunities in evidence based programs in prevention, treatment and recovery by 5%		43	45	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of trainings	State Baseline Measure	Administration	Training and Retention of qualified counselor are essential to prevention, treatment and recovery efforts.	local providers and state partners	4502.000000.000	
2.2.2	Maintain having at least 70 individuals certified to provide preventative services in South Carolina		70	70	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of individuals certified	South Carolina Association of Prevention Professionals and Advocates (SCAPPA)	Online database	Training and Retention of qualified counselors are essential to prevention and overall efforts.	local providers and state partners	4502.000000.000	
2.2.3	Maintain the number of individuals certified to provide treatment services in South Carolina to at least 2,000		2,141	2,000	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of individuals certified	South Carolina Association of Alcoholism and Drug Abuse Counselors (SCAADAC)	Online database	Training and Retention of qualified counselors are essential to treatment and overall efforts.	local providers and state partners	4502.000000.000	
3.1	Increase Integration Efforts with Local and State Partners										State Objective: Government and Citizens			
3.1.1	Maintain the 95 of state and local private and public partnerships for targeting substance use disorder		95	95	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of partnerships	Internal Records	Administration	Building a strong continuum of prevention, treatment and recovery providers is essential to increasing access to recovery and maintaining sobriety.	local providers and state partners	9806.550000X000	
3.2	Increase Services to the Uninsured										State Objective: Government and Citizens			
3.2.1	Increase the number of uninsured individuals receiving state funded assessments by 5%		8,500	8,925	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of assessments	Entered Electronic Health Record / Monthly	DAODAS EHR	Provides the department a measure of services to the uninsured and underinsured; a federal priority.	The public and local providers	4502.000000.000	
3.3	Increase Integration with Physical and Specialty Healthcare Providers										State Objective: Government and Citizens			
3.3.1	Use Screening, Brief Intervention and Referral to Treatment (SBIRT) as the standard of care at targeted Emergency Department Sites to fully screened (FS) 500 individuals for SUDs annually		310	500	Count	equal to or greater than	Federal Fiscal Year (October 1 - September 30)	Single Service Count	Internal Records	DAODAS Division of Treatment	Increases Access to Treatment Services and thus recovery opportunities.	Hospitals	4502.000000.000	

Perf. Measure Number	Description	Base	Target	Value Type	Desired Outcome	Time Applicable	Calculation Method	Data Source	Data Location	Stakeholder Need Satisfied	Primary Stakeholder	State Funded Program Number Responsible	Notes
3.3.2	Use SBIRT as the standard of care at targeted Emergency Department Sites to refer 100 individuals to treatment (RT) for SUDs annually	100	100	Count	equal to or greater than	Federal Fiscal Year (October 1 - September 30)	Number of referrals	Internal Records	DAODAS Division of Treatment	Increases Access to Treatment Services and thus recovery opportunities.	Hospitals	4502.000000.000	
3.3.3	Maintain the Psychiatry residency program, 11 Professionals, to train mental health professionals in South Carolina and increase access to mental health care.	11	11	Count	equal to or greater than	Federal Fiscal Year (October 1 - September 30)	Number of providers	Internal Records	DAODAS Division of Treatment	Increases Access to Treatment Services and thus recovery opportunities.	Hospitals	4502.000000.000	

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Budget Data

as submitted for the Accountability Report by:

J200 - Department Of Alcohol & Other Drug Abuse Services

State Funded Program No.	State Funded Program Title	Description of State Funded Program	(Actual) General	(Actual) Other	(Actual) Federal	(Actual) Total	(Projected) General	(Projected) Other	(Projected) Federal	(Projected) Total
0000.000000.002	HR Pay Only		\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
0100.000000.000	Administration	Provides program and policy guidance to all divisions of the agency.	\$ 315,470.92	\$ 112,847.09	\$ 431,203.30	\$ 859,521.31	\$ 345,934.71	\$ 80,235.00	\$ 195,649.00	\$ 621,818.71
0124.050000X000	Agency Lease Payment	Appropriations to pay for the lease at the Otarre Parkway Campus	\$ -	\$ -	\$ -	\$ -	\$ 363,238.00	\$ -	\$ -	\$ 363,238.00
0503.150000X000	State Block Grant	Enabling legislation (Section 44-49-10) (D) directs the agency to develop a block grant mechanism to distribute funding to the local alcohol and drug abuse authorities.	\$ 174,474.00	\$ -	\$ -	\$ 174,474.00	\$ 174,474.00	\$ -	\$ -	\$ 174,474.00
0503.200000X000	Local Salary Supplement	Section 8-11-945 of the code defines local health care providers who include local alcohol and drug abuse providers. When state employees receive a pay raise, those employees in the local agencies that are paid by a state dollar also receive that same pay raise.	\$ 5,040,258.00	\$ -	\$ -	\$ 5,040,258.00	\$ 5,040,258.00	\$ -	\$ -	\$ 5,040,258.00
0508.010000.000	Finance & Operations	Provides budget, financial and operational support to the agency's mission.	\$ 11,720,300.56	\$ 1,449,957.11	\$ 67,028,724.11	\$ 80,198,981.78	\$ 16,294,187.19	\$ 1,165,332.33	\$ 68,161,502.00	\$ 85,621,021.52
4502.000000.000	Programs	Funds are considered Aid To Entities and include pass through funding to Prevention, Treatment and Recovery services provided in the local alcohol and drug authorities.	\$ 1,667,952.79	\$ 196,352.39	\$ 8,289,325.53	\$ 10,153,630.71	\$ 1,856,376.06	\$ 259,714.67	\$ 7,748,002.00	\$ 9,864,092.73
6001.000000.000	Information Technology	Provides direct assistance in working with the agency's computer hardware, DSIT and with local data systems.	\$ 389,101.54	\$ 79,779.04	\$ 1,216,436.10	\$ 1,685,316.68	\$ 665,328.38	\$ 52,283.00	\$ 713,639.00	\$ 1,431,250.38
6501.000000.000	Legal & Compliance	Managse contracts and compliance with those contracts.	\$ 202,536.85	\$ 246,252.50	\$ 273,288.11	\$ 722,077.46	\$ 219,151.59	\$ 228,120.00	\$ 278,445.00	\$ 725,716.59
9500.050000.000	State Employer Contributions	Self Explanatory	\$ 427,339.71	\$ 189,218.87	\$ 633,076.85	\$ 1,249,635.43	\$ 367,050.59	\$ 188,712.00	\$ 774,817.00	\$ 1,330,579.59
9808.570000X000	The Courage Center	Costs related to The Courage Center expanding service to the Midlands	\$ 300,000.00	\$ -	\$ -	\$ 300,000.00	\$ -	\$ -	\$ -	\$ -
9809.600000X000	Statewide Fentanyl Awareness	Ad campaigns to raise awareness of the risks of Fentanyl	\$50,000.00	\$ -	\$ -	\$50,000.00	\$50,000.00	\$ -	\$ -	\$50,000.00
9810.580000X000	Community Wellness Outreach	Provides Eduicational toolk to the communities of those wwith Substance Use Disorder	\$100,000.00	\$ -	\$ -	\$100,000.00	\$50,000.00	\$ -	\$ -	\$50,000.00
9811.590000X000	SC Center of Excellence in Addiction	Provides Coordination between DAODAS, DPH, and State Universities	\$ 330,920.98	\$ -	\$ -	\$ 330,920.98	\$ 1,669,079.02	\$ -	\$ -	\$ 1,669,079.02
9823.250000X000	Unite Us IT Implem	Implementation of licences to the Unite Us Platform of Collaboration Software	\$ 594,000.00	\$ -	\$ -	\$ 594,000.00	\$ -	\$ -	\$ -	\$ -

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Legal Data

as submitted for the Accountability Report by:

J200 - Department Of Alcohol & Other Drug Abuse Services

Law number	Jurisdiction	Type	Description	Purpose the law serves:	Notes:	Changes made during FY2024
§ 24-13-1920	State	Statute	Directs DAODAS to establish of program of intervention, prevention and treatment for offenders and directs the department provide staff from funds appropriate annually by the general assembly.	Requires a service	The description of the law is self explanatory.	No Change
§ 24-13-1940	State	Statute	Directs cooperation between DAODAS and the DOC Director to develop policies to operate the center, fund the management of the center, including private contract, lease buildings, develop standards for counseling and disciplinary rules for residents of the center.	Requires a manner of delivery		No Change
§ 44-49-10	State	Statute	Establishes the South Carolina Department of Alcohol and Other Drug Abuse Services as a department of the Executive Branch.	Not related to agency deliverable	Establishes the agency.	No Change
§ 44-49-20	State	Statute	Names that the Director will be named by the Governor of the State.	Not related to agency deliverable		No Change
§ 44-49-40	State	Statute	Directs the agency to perform research on drugs and alcohol abuse.	Not related to agency deliverable		No Change
§ 44-49-50	State	Statute	Assigns an attorney to the department through the Attorney General's Office	Not related to agency deliverable		No Change
§ 44-49-60	State	Statute	Names an Adult Education Supervisor for the prevention of alcoholism.	Requires a service		No Change
§ 44-49-70	State	Statute	Names As Adult Prevention Supervisor.	Requires a service		No Change

Law number	Jurisdiction	Type	Description	Purpose the law serves:	Notes:	Changes made during FY2024
§ 44-49-80	State	Statute	Establishes a Program for the intervention, prevention and treatment for the public schools of the state.	Requires a service		No Change
§ 56-1-1320	State	Statute	A first offender also includes the mandatory completion of ADSAP through DAODAS.	Requires a service	DAODAS Contracts with Local Substance Use Disorder Providers to offer DUI Programming.	No Change
§ 56-1-1330	State	Statute	A provisional driver's license also includes the mandatory completion of ADSAP through DAODAS.	Requires a service	DAODAS Contracts with Local Substance Use Disorder Providers to offer DUI Programming.	No Change
§ 56-1-2110	State	Statute	Requires a drug and alcohol assessment certified by a Substance Abuse Professional as certified by DAODAS.	Requires a service	DAODAS Contracts with Local Substance Use Disorder Providers to offer DUI Programming.	No Change
§ 56-1-385	State	Statute	If an individual petitions a court to reinstate a permanent drivers license, he or she shall have to complete and ADSAP program as administered through DAODAS	Requires a service	DAODAS Contracts with Local Substance Use Disorder Providers to offer DUI Programming.	No Change
§ 56-5-2933	State	Statute	Driving with Unlawful Concentrations - enrollment in ADSAP is Mandatory	Requires a service	DAODAS Contracts with Local Substance Use Disorder Providers to offer DUI Programming.	No Change
§ 56-5-2941	State	Statute	Failure to Follow Ignition Interlock Rules Require the submission to an ADSAP Assessment	Requires a service	DAODAS Contracts with Local Substance Use Disorder Providers to offer DUI Programming.	No Change
§ 56-5-2950	State	Statute	Implied Consent Failure	Requires a service	DAODAS Contracts with Local Substance Use Disorder Providers to offer DUI Programming.	No Change
§ 56-5-2990	State	Statute	Suspension of a Driver's Licensed / Mandated Treatment	Requires a service	DAODAS Contracts with Local Substance Use Disorder Providers to offer DUI Programming.	No Change
§ 61-12-20	State	Statute	Directs county councils to designate an agency or organization to a appoint a governing body to right a county plan for a program to alcohol and drug abuse planning for that county.	Not related to agency deliverable		No Change

Law number	Jurisdiction	Type	Description	Purpose the law serves:	Notes:	Changes made during FY2024
§ 61-12-30	State	Statute	Requires Citizen Participation on the board of the local agency for citizen input.	Not related to agency deliverable		No Change
§ 61-12-40	State	Statute	Designates how revenue funds must be spend.	Distribute funding to another entity		No Change
§ 61-12-50	State	Statute	Requires annual reports and audits to DAODAS for review.	Requires a manner of delivery		No Change
§ 61-12-60	State	Statute	Allows counties to join together to designate a single authority.	Not related to agency deliverable		No Change
§ 61-12-70	State	Statute	These funds are considered supplemental to increase local, state or federal funding.	Requires a manner of delivery		No Change
Act 264 of the South Carolina General Assembly, 2016-2017 General Appropriations Act, Part IB, Section 37, Proviso 117.120.	State	FY24-25 Proviso	Directs the agency to work with certain entities in addressing the opioid crisis and specifically directs the agency to offer a collegiate recovery program and an MAT Diversion Program.	Distribute funding to another entity	Proviso Explanation is Self Explanatory. (Previously Proviso 117.119)	Amended Proviso Number Only
Act 264 of the South Carolina General Assembly, 2016-2017 General Appropriations Act, Part IB, Section 37, Proviso 37.1.	State	FY24-25 Proviso	Allows the agency to charge training and conference fees to support educational and professional development initiatives.	Requires a service	Report our agency must/may provide	No Change
Act 264 of the South Carolina General Assembly, 2016-2017 General Appropriations Act, Part IB, Section 37, Proviso 37.2.	State	FY24-25 Proviso	Directs the agency to provide gambling addiction services, including referral services and a mass communication campaign, pending appropriations.	Requires a service	Local Substance Use Disorder agencies provide gambling addiction programs.	No Change
Act 264 of the South Carolina General Assembly, 2016-2017 General Appropriations Act, Part IB, Section 37, Proviso 37.3.	State	FY23-24 Proviso	Directs the agency to transfer \$1.9 million to the Department of Health and Human Services for the purposes of Medicaid Match.	Not related to agency deliverable		No Change
Act 264 of the South Carolina General Assembly, 2016-2017 General Appropriations Act, Part IB, Section 37, Proviso 37.4.	State	FY24-25 Proviso	Allows the Department to carry forward from prior fiscal years into the current fiscal year unexpended funds in excess of the 10% of the agency's general fund appropriations.	Not related to agency deliverable		No Change

Law number	Jurisdiction	Type	Description	Purpose the law serves:	Notes:	Changes made during FY2024
Code of Laws of South Carolina 1976, as amended, Section 1.30-20.	State	Statute	Implements Name Change	Not related to agency deliverable		No Change
Code of Laws of South Carolina, 1976, as amended, Section 56-5-2990.	State	Statute	Mandated Treatment for Convicted DUI Offenders	Requires a service	DAODAS Contracts with Local Substance Use Disorder Providers to offer DUI Programming.	No Change
Code of Laws of South Carolina, 1976, as amended, Section 59-150-230 (i).	State	Statute	Authorizes funding for Gambling Addiction Services	Requires a manner of delivery		No Change
Code of Laws of South Carolina, 1976, as amended, Section 59-150-230 (i).	State	Statute	Directs the General Assembly to Fund DAODAS for Gambling Addiction Programs	Distribute funding to another entity		No Change
Code of Laws of South Carolina, 1976, as amended, 44-52-10 et. seq.	State	Statute	Involuntary commitment procedures for those experiencing substance abuse.	Requires a service	DAODAS Contracts with Local Substance Use Disorder Providers to work with local mental health offices to implement the service.	No Change
Code of Laws of South Carolina, 1976, as amended, Section 16-17-500.	State	Statute	Courts may order minors to undergo a tobacco education program certified by DAODAS.	Requires a service	Local Substance Use Disorder agencies provide tobacco cessation programs.	No Change
Code of Laws of South Carolina, 1976, as amended, Section 16-25-20 (G).	State	Statute	Criminal Domestic Violence / Offender Referral to Substance Abuse programs Coordinated through DAODAS.	Requires a service	The description of the law is self explanatory.	No Change
Code of Laws of South Carolina, 1976, as amended, Section 24-13-1910 et.seq.	State	Statute	Coordination with the Department of Corrections (DOC) for Substance Abuse Services delivered to rehabilitate alcohol and drug offenders, as determined by DOC.	Requires a service	Ongoing Program.	No Change
Code of Laws of South Carolina, 1976, as amended, Section 44-49-10 et.seq.	State	Statute	Agency Enabling Legislation	Not related to agency deliverable		No Change
Code of Laws of South Carolina, 1976, as amended, Section 56-1-286,	State	Statute	Underage DUI / Zero Tolerance / Administrative License Revocation / Mandated Treatment	Requires a service	DAODAS Contracts with Local Substance Use Disorder Providers to offer DUI Programming.	Amended

Law number	Jurisdiction	Type	Description	Purpose the law serves:	Notes:	Changes made during FY2024
Code of Laws of South Carolina, 1976, as amended, Section 56-1-400	State	Statute	Requires mandatory treatment for Ignition Interlock Drivers who fail to follow the Ignition Interlock Law.	Requires a service	DAODAS Contracts with Local Substance Use Disorder Providers to offer DUI Programming.	Amended
Code of Laws of South Carolina, 1976, as amended, Section 56-5-2930 et. seq.	State	Statute	DUI / Mandated Treatment	Requires a service	DAODAS Contracts with Local Substance Use Disorder Providers to offer DUI Programming.	No Change
Code of Laws of South Carolina, 1976, as amended, Section 56-5-2933 et. seq.	State	Statute	DUAC / Mandated Treatment	Requires a service	DAODAS Contracts with Local Substance Use Disorder Providers to offer DUI Programming.	No Change
Code of Laws of South Carolina, 1976, as amended, Section 56-5-2951 et. seq.	State	Statute	Refusal to Submit to BAC / Administrative License Revocation / Mandated Treatment	Requires a service	DAODAS Contracts with Local Substance Use Disorder Providers to offer DUI Programming.	No Change
Code of Laws of South Carolina, 1976, as amended, Section 61-12-10 et.seq.	State	Statute	Local Excise Tax Funding Distribution / County Planning Required	Distribute funding to another entity	Local Substance Abuse Disorder must submit County Strategic Plans for approval by DAODAS to receive this funding.	No Change
Code of Laws of South Carolina, as amended, 1976, Section 56-1-2110 (G)	State	Statute	Requires individuals who have a commercial driver's license suspended due to a failed urine screen, to be assessed and treated, if necessary, by a DAODAS substance abuse professional.	Requires a service	DAODAS Contracts with Local Substance Use Disorder agencies to provide substance use programming to those holding a CDL.	No Change
Code of Laws of South Carolina 1976, as amended, Section 1-30-10.	State	Statute	Establishes the South Carolina Department of Alcohol and Other Drug Abuse Services as a department of the Executive Branch.	Not related to agency deliverable		No Change
South Carolina Code of Laws, 1976, as amended, Section 16-25-320 et.seq.	State	Statute	Designates the department as a member of the Domestic Violence Advisory Committee.	Board, commission, or committee on which someone from our agency must/may serve		No Change
South Carolina Code of Laws, 1976, as amended, Section 17-22-510.	State	Statute	Directs the South Carolina Prosecution Commission to discuss administrative requirements of an Alcohol Education Program operated by local solicitors.	Board, commission, or committee on which someone from our agency must/may serve		No Change
South Carolina Code of Laws, 1976, as amended, Section 20-7-8920.	State	Statute	Requires underage individuals who violated underage drinking laws to attend a certified alcohol intervention program as certified by the department.	Requires a service	DAODAS Contracts with Local Substance Use Disorder agencies to offer alcohol intervention programming.	No Change

Law number	Jurisdiction	Type	Description	Purpose the law serves:	Notes:	Changes made during FY2024
South Carolina Code of Laws, 1976, as amended, Section 43-35-560.	State	Statute	Designates the department as a member of the Vulnerable Adult Fatality Review Committee.	Board, commission, or committee on which someone from our agency must/may serve		No Change
South Carolina Code of Laws, 1976, as amended, Section 44-107-80.	State	Statute	Upon request, requires DAODAS to provide technical assistance to a state agency to assist in implementing the state Drug Free Workplace Act.	Requires a service		No Change
South Carolina Code of Laws, 1976, as amended, Section 44-53-490.	State	Statute	Requires the Department of Health and Environmental Control to submit an annual report to DAODAS on inspected practitioners who dispense or distribute controlled substances.	Requires a service		No Change
South Carolina Code of Laws, 1976, as amended, Section 59-1-380(D)	State	Statute	Requires the Department to work with DHEC and the Department of Education to develop tobacco exclusion policies for all school districts.	Requires a service	The report has not been provided to DAODAS.	No Change
South Carolina Code of Laws, 1976, as amended, Section 61-4-1515(A)(8).	State	Statute	Requires breweries and micro-distilleries to go through a DAODAS approved merchant education program to train employees who serve beer or wine for on-premise consumption.	Requires a service	The department contracts with local SUD providers to provide this prevention program.	No Change
South Carolina Code of Laws, 1976, as amended, Section 61-6-480.	State	Statute	Requires merchant education certified through the department for vendors who violate underage drinking laws.	Requires a service	DAODAS provides merchant education through its local substance use disorder providers.	No Change
South Carolina Code of Laws, 1976, as amended, Section 63-11-1930.	State	Statute	Designates the department as a member of the State Child Fatality Advisory Committee.	Board, commission, or committee on which someone from our agency must/may serve		No Change
South Carolina Code of Laws, 1976, as amended, Section 63-7-1690 (A)(1).	State	Statute	Allows a court of competent jurisdiction to order DAODAS approved treatment services before the return of a child to a home, if the child has been removed by DSS.	Requires a service	Local Substance use Disorder agencies provide treatment services.	No Change
US Public Law 102-321	Federal	Statute	Establishes the federal Substance Abuse Prevention and Treatment Block Grant with administration requirements.	Distribute funding to another entity		No Change

Law number	Jurisdiction	Type	Description	Purpose the law serves:	Notes:	Changes made during FY2024
US Public Law 91-616 of 1970.	Federal	Statute	Directs that the department is the single state authority for the delivery of the Substance Abuse Prevention and Treatment Block Grant.	Requires a service	Substance Use Disorder Services.	No Change
US Public Law 92-255 of 1972.	Federal	Statute	Directs that the department is the single state authority for the delivery of the Substance Abuse Prevention and Treatment Block Grant.	Requires a service	Substance Use Disorder Services.	No Change
US Public Law 92-255 of 1972.	Federal	Statute	Directs that the department is the single state authority for the delivery of the Substance Abuse Prevention and Treatment Block Grant.	Requires a service	Substance Use Disorder Services.	No Change
US Public Law 91-616 of 1970.	Federal	Statute	Directs that the department is the single state authority for the delivery of the Substance Abuse Prevention and Treatment Block Grant.	Requires a service	Substance Use Disorder Services.	No Change
US Public Law 92-255 of 1972.	Federal	Statute	Directs that the department is the single state authority for the delivery of the Substance Abuse Prevention and Treatment Block Grant.	Requires a service	Substance Use Disorder Services.	No Change
Act 84 of the South Carolina General Assembly, Appropriations Act, Part IB, Provisos, Proviso 37.5.	State	FY23-24 Proviso	Creates the South Carolina Center of Excellence along with USC, MUSC, and Clemson University plus DAODAS and DPH to collaborate on research, training, program implementation and service delivery for preventing and addressing the opioid use disorder and other substance use disorders.	Requires a manner of delivery		No Change
Act 226, of the South Carolina General Assembly, Appropriations Act, Part IB Provisos, Section 37, Proviso 37.6.	State	FY24-25 Proviso	Directs the department to pay lease payments for the lease directed in proviso 118-22 of Act 84 of 2023 and to maintain such funds in a separate and distinct account.	Funding agency deliverable(s)		Amended

Law number	Jurisdiction	Type	Description	Purpose the law serves:	Notes:	Changes made during FY2024
A66, South Carolina Code Section 17-5-35 to allow coroners to administer and opioid antidote.	State	Statute	Allows coroners to administer opioid anti-dotes, including deputy coroners, or other designees.	Not related to agency deliverable.		Amended
A177, South Carolina Code Section, 44-53-72 (added)	State	Statute	Adds Xylazine as a controlled substance III, so as to make it illegal to manufacture, produce or possess or distribute the drug, with certain equine exceptions.	Not related to agency deliverable.		Amended
Act 55 of 2023 - Amended Sections of the DUI Code	State	Statute	All Offender Law - requires mandatory participation in the ignition interlock program for any conviction of alcohol related driving offenses or DUIs regardless of blood alcohol content. Mandatory Treatment remains in place for convictions.	Requires a service		Amended
Act 160, South Carolina Code adding Article 2, Chapter 49, Title 44.	State	Statute	Directs DAODAS to enact, within 6 months of the date of the effective date of the act to develop a voluntary certification program for recovery housing and to approve one entity to take on this role.	Requires a service		Amended
Act 158, South Carolina Code, Section 47-25-250.	State	Statute	Adds 1 hour of Continuing Education in Suicide Prevention for LPCs, LMFTs, Psychoeducational Specialists and LACs.	Not related to agency deliverable.		Amended

2024

Services Data

as submitted for the Accountability Report by:

J200 - Department Of Alcohol & Other Drug Abuse Services

Description of Service	Description of Direct Customer	Customer Name	Others Impacted by Service	Division or major organizational unit providing the service.	Description of division or major organizational unit providing the service.	Primary negative impact if service not provided.	Changes made to services during FY2024	Summary of changes to services
Ensuring the balance of alcohol prevention, intervention, treatment and recovery services are contracted to public or private providers with an emphasis on the local SUD providers for direct delivery.	Local Alcohol and Drug Abuse Authorities pursuant to Title 61, Chapter 12. Opioid Treatment Providers. Community Distributors. Recovering Community Organizations.		General Public	Ensuring the balance of alcohol prevention, intervention, treatment and recovery services are contracted to private providers with an emphasis on the local SUD providers for direct delivery.	Finance	Should the agency not reach its goals of delivering efficient and effective prevention, intervention, treatment, and recovery services, or should it fall short in meeting the opioid crisis head-on, the negative impact on the citizens of South Carolina would include an increase in overall mortality, increased healthcare costs, and a rise in addiction that would impact the workforce and the economic engine of the state, and ultimately the quality of life of all South Carolinians.	Amend	The agency contracted with hospitals for screening, brief intervention and referral to local alcohol and drug providers, as well as contracting with certain hospitals to induct opioid substance use disorder clients into medication assisted treatment. Additionally, the agency expanded its partnerships with recovery community organizations, housing opportunities for the homeless and homeless veterans, opioid treatment programs and community distributors.
Provides TA and Policy guidance to guide innovative SUD programming throughout the SUD System.	Local Alcohol and Drug Abuse Authorities pursuant to Title 61, Chapter 12. Opioid Treatment Providers. Community Distributors. Recovering Community Organizations.	Contracted Providers	General Public	Provides TA and Policy guidance to guide innovative SUD programming throughout the SUD System.	Programs	Collateral impacts would include a rise in underage drinking and alcohol-related crashes, shortened life spans, and increased comorbidities in chronic disease.	Amend	The agency provided additional TA to OTPs through a contract with Medicaid and formally acts as the State SOTA. Additionally, the agency added to its arsenal of MAT programs the use of sublocade and other reversal opioid medication.
Provides TA and Policy guidance to guide innovative SUD programming throughout the SUD System.	Local Alcohol and Drug Abuse Authorities pursuant to Title 61, Chapter 12. Opioid Treatment Providers. Community Distributors. Recovering Community Organizations.	Contracted Providers	General Public	Provides TA and Policy guidance to guide innovative SUD programming throughout the SUD System.	Compliance	See explanation above.	Amend	Daodas has also joined with 8 hospitals, 29 OTPs and a larger recovery community to expand its efforts to put more opioid reversal drugs in communities. Additionally, the agency is working with an expand drug system and implemented a new program known as LEAD, a collaborative approached between Clemson and six different law enforcement agencies to reduce criminal involvement in individuals that require substance use and co-occurring disorders.
Provides guidance on IT issues and HIPPA compliance regulations.	Local Alcohol and Drug Abuse Authorities pursuant to Title 61, Chapter 12. Opioid Treatment Providers. Community Distributors. Recovering Community Organizations.	Contracted Providers	General Public	Provides guidance on IT issues and HIPPA compliance regulations.	Information Technology	See explanation above.	Amend	The agency widened its efforts to work with the distribution of opioid reversal drugs across the state.

Description of Service	Description of Direct Customer	Customer Name	Others Impacted by Service	Division or major organizational unit providing the service.	Description of division or major organizational unit providing the service.	Primary negative impact if service not provided.	Changes made to services during FY2024	Summary of changes to services
Distribution of Fentanyl Strips	Persons using legal or illegal opioids.s.	Individuals using legal or illegal opioids.	Family, Caregivers, Front Line Responders, Emergency Room Personnel, Hospitals.	Prevention Department, DAODAS	Preventing the use of alcohol, tobacco and other drugs.	Possibility of Overdose or Death of the individual using illicit or prescribed drugs.	Amend	MAT drug courts in 2 judicial circuits, plus pushed out thousands of testing strips across the steps.
Drug Courts	Persons charged with non-violent crimes.	Individuals who undergo treatment to forego a jail or prison sentence.	Family, Law Enforcement, Courts, Jails and Prisons	Compliance and Treatment Divisions, DAODAS	Ensuring adherence to grants and contracts. Treating substance use disorder.	Increase the possibility of an individual going to jail or prison.	Amend	DAODAS widened its efforts to touch more recovery ormaniations and colleges and universities.
Rapid Response Opioid Notifications	Communities who are experiencing high overdose rates.	The 46 Counties of South Carolina	Family, Caregivers, Front Line Responders, Emergency Room Personnel, Hospitals, Mortuaries	Administration, DAODAS	Sets the agency policy and programmatic direction.	Possibility of Overdose or Death of individuals who use legal or illicit opioids..	No Change	
Fetal Alcohol Syndrome Disorder Prevention	Pregnant Women who have substance use disorder diagnoses.	Pregnant Women who have substance use disorder diagnoses.	Family, Mothers, Law Enforcement, Medical Personnel, Hospitals	Treatment Division / Administration, DAODAS	Treats individuals that have substance use disorders.	Increases the possibility that babies may be born with fetal alcohol syndrome.	Amend	Expanded programmatic and partnerships.
Veterans Services	Service Veterans	Veterans who are suffering from substance use or co-occurring diagnoses	Family, Social Services, Medical Service Personnel	Treatment Division, DAODAS	Treats individuals that have substance use disorders.	Increases the possibility that veterans will not have access to substance use disorder services.	No Change	
Housing Services	Individuals seeking housing in certified homes.	Individuals leaving inpatient facilities to continue treatment in the community	Homeless, Families, Oxford Houses, Sober Homes, Coed College Living Home - Sponsored by Luthern Services.	Compliance	Ensures contracts are implemented with corresponding outcomes reported.	increases the possibility that individuals continue on the road to recovery and increases their use of community recovey capital.	Add	Expanded programmatic and partnerships.
Expanded Collegiate Recovery Programs	Students on college campuses who are seeking a recovery environment at higher learning institutions.	Colleges and Universities	Students, Families, Recovery Organizations	Compliance and Treatment Divisions, DAODAS	See Explanation Above	Increases the possibilities of students at colleges and Universities who are seeking recovery environments and recovery communities.	Add	Expanded programmatic and partnerships.

2024

Partnerships Data

as submitted for the Accountability Report by:

J200 - Department Of Alcohol & Other Drug Abuse Services

Type of Partner Entity	Name of Partner Entity	Description of Partnership	Change to the partnership during the past fiscal year
Private Business Organization	8 Hospitals	Provides medical care to opioid and substance use addicted involved patients.	No Change
Federal Government	Atlanta Carolinas High Intensity Drug Trafficking Area	Identifies areas of the death with high drug trafficking areas and opioid hot spots	No Change
Federal Government	Atlanta- Carolinas High Intensity Drug Trafficking Area	Works with the Opioid Emergency Response Team to ID high drug trafficking areas and opioid hot spots in South Carolina.	No Change
State Government	Birth Outcomes Initiative (BOI)	Development of policy to reduce adverse birth outcomes.	No Change
Higher Education Institute	Colleges and Universities	DAODAS is partnering with colleges and universities to develop recovery environments on college campuses in South Carolina.	No Change
State Government	DAODAS Staff	Integral to achieving agency vision, mission and goals.	No Change
State Government	Department of Veterans' Affairs	DAODAS is partnering with Veterans Affairs to manage a veterans recovery housing program. Supporting the cost of rent for veterans in certified recovery residences.	Amend

Type of Partner Entity	Name of Partner Entity	Description of Partnership	Change to the partnership during the past fiscal year
State Government	DPH	Major Health Partner / Opioid Emphasis	No Change
State Government	DMH	DAODAS supports a liaison to explore services for co-occurring patients	Amend
State Government	DSS	Major Client Partner. DAODAS supports a liaison to help guide policy and to comanage programs that support substance-impacted families.	Amend
Non-Governmental Organization	First Responders (EMS / Police / Fireman)	Provides health care services, first on the scene to address opioid emergencies.	No Change
State Government	Governor's Office	Provides Leadership / Cabinet Agency	No Change
State Government	LLR	Works closely with the agency to ensure that regulations governing the distribution of certain medications is compliant with state law and medical protocols.	No Change
Local Government	Local SUD Providers / Behavioral Health Association of South Carolina (BHSA)	Delivers direct SUD services to individuals, families and communities.	No Change
State Government	Medicaid (DHHS)	Major Payor of SUD Services / Policy Development	No Change

Type of Partner Entity	Name of Partner Entity	Description of Partnership	Change to the partnership during the past fiscal year
Non-Governmental Organization	Mothers Against Drug Drivers (MADD)	Works to decrease DUIs.	No Change
Higher Education Institute	MUSC	Assists the agency in proving services to train physicians in the art of prescribing MAT medicines and connecting these physicians to opioid treatment providers, plus provide ongoing training and evaluation.	No Change
Professional Association	National Alliance for Recovery Residences	DAODAS is working with NARR, and its local affiliate, to expand the availability of well-operated, ethical and supportive housing across the state and is currently performing a gap analysis in the state build a more true picture of how many exist in South Carolina.	No Change
Non-Governmental Organization	National Association of State Alcohol and Drug Agency Directors	National membership association guiding Substance Use Policy	Amend
Private Business Organization	Opioid Treatment Providers	Provides Medication Assisted Treatment (Methadone) to opiate addicted individuals	No Change
Non-Governmental Organization	Oxford House, Inc.	Agency Partner to increase recovery housing options throughout South Carolina.	No Change
Non-Governmental Organization	Pacific Institute for Research and Evaluation (PIRE)	Assists in the development, implementation and evaluation of prevention programs across South Carolina.	No Change
Professional Association	Primary and Emergency Room Physicians	Identifying SUD Patients	No Change

Type of Partner Entity	Name of Partner Entity	Description of Partnership	Change to the partnership during the past fiscal year
Non-Governmental Organization	Recovery Community Organizations	DAODAS has partnered to expand recovery efforts statewide.	No Change
Non-Governmental Organization	McLeod Health / Prisma / MUSC	Engaged with 3 hospitals to induct opioid addicted clients within their inpatient units to medication assisted treatment (MAT)	Amend
Professional Association	Rural Health Community Opioid Consortia	DAODAS has partnered to address access to MAT in rural areas.	No Change
Federal Government	SAMHSA	Federal Block Grant Authority	No Change
Non-Governmental Organization	SC Hospital Association	Supporting program development and helping to develop capacity in hospitals to address substance use.	Amend
State Government	SC Joint Council on Children and Adolescents	Develop a coordinated system of care that promotes the efficient provision of effective services for children, adolescents, and their families.	No Change
State Government	SCDC	DAODAS supports robust addiction services for pre-release inmates.	Amend
State Government	SLED	Works closely with SLED as co-chair of the State Opioid Emergency Crisis Team as well as the reapid response team to identify emergent high use opioid use in those areas of the state with sudden high overdose rates.	No Change

Type of Partner Entity	Name of Partner Entity	Description of Partnership	Change to the partnership during the past fiscal year
Local Government	Solicitors	DAODAS is partnering with local solicitors to implement MAT Drug Courts.	No Change
Professional Association	South Carolina Alliance for Recovery Communities	DAODAS is working with the state affiliate focused on bringing standards, credibility, ethics and education to the state's recovering communities.	No Change
Professional Association	South Carolina FAVOR	Provides Peer Support training across the state, while also providing peer support recovery services to the citizens of the upstate of South Carolina.	Amend
State Government	South Carolina General Assembly	Appropriates funding for SUD Services.	No Change
State Government	South Carolina Opioid Response Team	Governor McMaster established a task force which has developed a multi-lateral strategy to prevent and treat the misuse of prescription opioids.	No Change
State Government	South Carolina Tobacco Collaborative	The Collaborative seeks to eliminate the burden of tobacco use through policy development, advocacy work, education, coalition building and promotes tobacco prevention and tobacco cessation efforts on the state and local level	No Change
State Government	Department of Commerce	Began funding a housing program for individuals in need of housing.	Add
Higher Education Institute	HBCUs	Added HBCUs to the Collegiate Recovery Program	Add

Type of Partner Entity	Name of Partner Entity	Description of Partnership	Change to the partnership during the past fiscal year
Federal Government	US Department of Housing and Urban Development	Provide funds for safe and affordable housing for homeless veterans.	Add
State Government	South Carolina Judiciary Agencies	Provide funds for safe and affordable housing for homeless veterans.	Add
Local Government	Various Judicial Community Distributors	Distributes Overdose Reversal Medications	Add
Higher Education Institute	College and Universities	Distributes Overdose Reversal Medications	Add
Professional Association	Community Distributors	Distributes Overdose Reversal Medications	Add
		144 Partners Representing state governments, local governments, non-profit organizations, Colleges and University, OTPs, Private Businesses, Treatment Centers, Local County Alcohol and Drug Authorities, Churches and Hospitals and Clinics.	Amend

2024

Reports Data

as submitted for the Accountability Report by:

J200 - Department Of Alcohol & Other Drug Abuse Services

Report Name	Law Number (if applicable)	Summary of information requested in the report	Date of most recent submission DURING the past fiscal year	Reporting Frequency	Type of entity/entities	Method to access the report	Direct access hyperlink or agency contact (if not provided to LSA for posting online)	Changes to this report during the past fiscal year	Explanation why a report wasn't submitted
Agency Accountability Report	Section 1-1-810	The report "must contain the agency's or department's mission, objectives to accomplish the mission, and performance measures that show the degree to which objectives are being met." Agencies must "identify key program area descriptions and expenditures and link these to key financial and performance results measures."	September-22	Annually	Governor or Lt. Governor AND Legislative entity or entities	Provided to LSA for posting online	slutton@daodas.sc.gov	No Change	Report Submitted.
Agreed-Upon Procedures (AUP)	Section 11-17-20(A)	A Review of various Accounting, Reporting, Contractual and Human Resources Functions	June-23	Annually	South Carolina state agency or agencies	Available on another website	slutton@daodas.sc.gov	No Change	Report Submitted.
Federal Financial Report	Federal Law 2CFR Section 200.328-332	Required Financial Reporting for various Federal Grants	December-22	Annually	Entity within federal government	Available on another website	slutton@daodas.sc.gov	No Change	Report Submitted.
Federal Financial Report	Federal Law 2CFR Section 200.328-332	Required Financial Reporting for various Federal Grants	March-23	Quarterly	Entity within federal government	Available on another website	slutton@daodas.sc.gov	No Change	Report Submitted.
Federal Financial Report	Federal Law 2CFR Section 200.328-332	Required Financial Reporting for various Federal Grants	March-23	Twice a year	Entity within federal government	Available on another website	slutton@daodas.sc.gov	No Change	Report Submitted.
Governance, Risk and Compliance Review	Incorporated by CCEIS Policy, April 2017.	Efforts to Update Mitigation Controls with the Accounting and Reporting Sections of the Agency	April-23	Annually	South Carolina state agency or agencies	Electronic file available upon request	slutton@daodas.sc.gov	No Change	Report Submitted.
Petty Cash Review	Section 11-7-20(B)	Review of Procedures and Reconciliations	June-23	Twice a year	South Carolina state agency or agencies	Electronic file available upon request	slutton@daodas.sc.gov	No Change	Report Submitted.
Substance Abuse Block Grant Application and Report	US Public Law 102-321	State Plan for the Expenditure of Federal Funding	October-22	Annually	Entity within federal government	Available on another website	slutton@daodas.sc.gov	No Change	Report Submitted.

Report Name	Law Number (if applicable)	Summary of information requested in the report	Date of most recent submission DURING the past fiscal year	Reporting Frequency	Type of entity/entities	Method to access the report	Direct access hyperlink or agency contact (if not provided to LSA for posting online)	Changes to this report during the past fiscal year	Explanation why a report wasn't submitted
Substance Abuse Block Grant Statewide Single Audit	1945(g) of Title XIX, Part B, Subpart III of Public Health Services Act (42USC 300x-56(g))	Review of Block Grant FFY2023 Substance Abuse and Mental Health	August-23	Other	South Carolina state agency or agencies	Available on another website	slutton@daodas.sc.gov	No Change	Report Submitted.
Legislative Audit Council	Requested by House Ways and Means Health Subcommittee	The report focused on the agency's opioid service efforts, Covid-19 response, its involvement with the local alcohol and drug authorities, Gambling Addiction Services, Carry Forward Funding and a review of staffing levels.	August-22	Other	Legislative entity or entities AND South Carolina state agency or agencies	Electronic copy available upon request	slutton@daodas.sc.gov	Add	Report Submitted.

AGENCY NAME:	South Carolina Department of Alcohol and Other Drug Abuse Services		
AGENCY CODE:	J200	SECTION:	037

2024
Accountability Report

SUBMISSION FORM

I have reviewed and approved the data submitted by the agency in the following templates:

- Data Template
 - Reorganization and Compliance
 - FY2024 Strategic Plan Results
 - FY2025 Strategic Plan Development
 - Legal
 - Services
 - Partnerships
 - Report or Review
 - Budget
- Discussion Template
- Organizational Template

I have reviewed and approved the financial report summarizing the agency’s budget and actual expenditures, as entered by the agency into the South Carolina Enterprise Information System.

The information submitted is complete and accurate to the extent of my knowledge.

AGENCY DIRECTOR <i>(SIGN AND DATE):</i>	SIGNATURE ON FILE	Signature Received: 09/13/2024
<i>(TYPE/PRINT NAME):</i>	Sara Goldsby	

BOARD/CMSN CHAIR <i>(SIGN AND DATE):</i>	N/A	
<i>(TYPE/PRINT NAME):</i>		